

# **Sheridan Memorial**

## **Guidelines for Tranexamic Acid (TXA) Administration**

### **In Major Trauma**

Tranexamic Acid (TXA) is an anti-fibrinolytic that inhibits the activation of plasminogen to plasma, thereby preventing fibrinolysis and the breakdown of clots. In trauma, it is used for the prompt control of hemorrhage.

#### **Indications for use in trauma:**

- Systolic blood pressure <90mmHg
- Heart rate > 110
- Neither of the above, but still considered at risk for significant hemorrhage
- **<3 hours since time of injury**
- Patient is >12 years of age \*\*see pediatric dosing considerations if <12 yrs of age\*\*

#### **Contraindications to use of IV TXA:**

- More urgent critical resuscitation interventions needed (do not delay to give TXA)
- Isolated head injury
- Time of injury >3 hours

#### **Administration of TXA**

- TXA is stored in the med room cabinet where the TPA, IV antibiotics, & IV KCL are stored
- Bolus: 1gram IV over 10 minutes  
Add 1000mg or 1 vial of 1000mg/10ml to 100cc NS (100mg/ml)  
Infuse per pump at 600cc/hr
- Infusion: 1gram IV over 8 hours  
Add 1000mg or 1 vial of 1000mg/10ml to 500cc NS  
Infuse per pump at 62.5cc/hr

#### **Pediatric dosing consideration:**

- **<12 years of age**
- Bolus: 15mg/kg/10minutes
- Infusion: 2mg/kg/hr  
Consider adding 500mg to 500cc NS  
Infuse per pump at 2cc/kg/hr